



REDACTED – FOR PUBLIC INSPECTION

Via ECFS

June 26, 2017

Marlene H. Dortch, Secretary
Federal Communications Commission
445 12th Street, SW
Washington, DC 20554

**Re: WC Docket 14-58, ETC Annual Report and Certification
Southern Kansas Telephone, Study Area Code 411833**

Dear Ms. Dortch:

Pursuant to sections 54.313 and 54.422 of the Commission's Rules Southern Kansas Telephone hereby submits its annual Form 481. Southern Kansas Telephone seeks confidential treatment of its financial information under the FCC's Protective Order for section 54.313(f)(2).¹ Additionally, in a separate Southern Kansas Telephone seeks confidential treatment of the redacted portions of the Form 481 Section 200 Service Outage Reporting requirements, pursuant to 47 C.F.R. § 0.459. The petition for confidential treatment and confidential information referenced above will be submitted separately to the FCC as required by the Protective Order. This filing is a redacted version for public inspection submitted in the Electronic Comment Filing System.

Respectfully submitted,



Brian Jarvis
Senior Financial Consultant

¹ In the Matter of Connection America Fund, WC Docket No. 10-90; ETC Annual Reports and Certifications, WC Docket No. 14-58. Protective Order, DA 16-296, rel. March 22, 2016. ("Protective Order").

**FCC Form 481 - Carrier Annual Reporting
Data Collection Form****REDACTED FOR PUBLIC INSPECTION**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	411833
<015>	Study Area Name	SOUTHERN KANSAS TEL
<020>	Program Year	2018
<030>	Contact Name: Person USAC should contact with questions about this data	Brian Jarvis
<035>	Contact Telephone Number: Number of the person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address: Email of the person identified in data line <030>	bjarvis@tcatel.com
	Form Type	54.313 and 54.422

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	411833
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<030>	Contact Name - Person USAC should contact regarding this data	Brian Jarvis
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bjarvis@tccatel.com

<210> For the prior calendar year, were there any reportable voice service outages? Yes

[illegible]

**(300) Unfulfilled Service Request
Data Collection Form**

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	411833
<015>	Study Area Name	SOUTHERN KANSAS TEL
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Brian Jarvis
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bjarvis@tcotel.com

<300> Unfulfilled service request (voice)

NA

<310> Detail on attempts (voice)

Name of Attached Document

<320> Unfulfilled service request (broadband)

NA

<330> Detail on attempts (broadband)

Name of Attached Document

REDACTED FOR PUBLIC INSPECTION

(400) Number of Complaints per 1,000 customers
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	411833
<015>	Study Area Name	SOUTHERN KANSAS TEL
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<030>	Contact Name - Person USAC should contact regarding this data	Brian Jarvis
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bjarvis@tcotel.com
<400>	Select from the drop-down list to indicate how you would like to report voice complaints (zero or greater) for voice telephony service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.	Offered only fixed voice
<410>	Complaints per 1000 customers for fixed voice	0.0
<420>	Complaints per 1000 customers for mobile voice	
<430>	Select from the drop-down list to indicate how you would like to report end-user customer complaints (zero or greater) for broadband service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.	Offered only fixed broadband
<440>	Complaints per 1000 customers for fixed broadband	0.0
<450>	Complaints per 1000 customers for mobile broadband	

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(500) Compliance With Service Quality Standards and Consumer Protection Rules
Data Collection FormFCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

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<039>	Contact Email Address - Email Address of person identified in data line <030>	bjarvis@tccatel.com
<500>	Certify compliance with applicable service quality standards and consumer protection rules	Yes
<510>	Descriptive document for Service Quality Standards & Consumer Protection Rules Compliance	411833KS510.pdf
<515>	Certify compliance with applicable minimum service standards	

(600) Functionality in Emergency Situations
Data Collection Form

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OMB Control No. 3060-0986/OMB Control No. 3060-0819

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<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bjacvls@tccatel.com
<600>	Certify compliance regarding ability to function in emergency situations	Yes
<610>	Descriptive document for Functionality in Emergency Situations	411833KS610.pdf

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

[illegible]

(710) Broadband Price Offerings Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
-----------------------------------------------------------------------	----------------------------------------------------------------------------------

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[illegible]

Data Collection Form

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

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<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bjarvis@tcatel.com
<810>	Reporting Carrier	Southern Kansas Telephone Company, Inc.
<811>	Holding Company	Not Applicable
<812>	Operating Company	Southern Kansas Telephone Company, Inc.

[illegible]

(900) Tribal Lands Reporting Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	411833
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<039> Contact Email Address - Email Address of person identified in data line <030>	bjarvis@tcatel.com

<900> Does the filing entity offer tribal land services? (Y/N) No

<910> Tribal Land(s) on which ETC Serves

<920> Tribal Government Engagement Obligation

Name of Attached Document

If your company serves Tribal lands, please select (Yes, No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions.
- <922> Feasibility and sustainability planning;
- <923> Marketing services in a culturally sensitive manner;
- <924> Compliance with Rights of way processes
- <925> Compliance with Land Use permitting requirements
- <926> Compliance with Facilities Siting rules
- <927> Compliance with Environmental Review processes
- <928> Compliance with Cultural Preservation review processes
- <929> Compliance with Tribal Business and Licensing requirements.

Select Yes or No or Not Applicable

**(1000) Voice and Broadband Service Rate Comparability
Data Collection Form**

FCC Form 481

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<039>	Contact Email Address - Email Address of person identified in data line <030>	bjarvis@tcatel.com

<1000> Voice services rate comparability certification Yes

<1010> Attach detailed description for voice services rate comparability compliance

Name of Attached Document

<1020> Broadband comparability certification

Yes - Pricing is no more than the most recent applicable benchmark announced by the Wireline Competition Bureau

<1030> Attach detailed description for broadband comparability compliance

Name of Attached Document

(1100) No Terrestrial Backhaul Reporting Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<039>	Contact Email Address - Email Address of person identified in data line <030>	bjarvis@tcatel.com

<1100> Certify whether terrestrial backhaul options exist (Y/N)

Yes

<1130> Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(g).

(1200) Terms and Condition for Lifeline Customers Lifeline Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<039>	Contact Email Address - Email Address of person identified in data line <030>	bjarvis@tcatel.com

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

Name of Attached Document

<1220> Link to Public Website

HTTP

"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

- | | |
|------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| <1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, | <input checked="" type="checkbox"/> |
| <1222> Details on the number of minutes provided as part of the plan, | <input checked="" type="checkbox"/> |
| <1223> Additional charges for toll calls, and rates for each such plan. | <input checked="" type="checkbox"/> |

(2005) Price Cap Carrier Additional Documentation

Data Collection Form

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

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Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate.

Incremental Connect America Phase I reporting

- <2011> 3rd Year Certification 47 CFR §54.313(b)(1)(ii) - Note that for the July 2017 certification, this applies to Round 2 recipients of Incremental Support.
- <2022> Recipient certifies, representing year three after filing a notice of acceptance of funding pursuant to 54.312(c), that the locations in question are not receiving support under the Broadband Initiatives Program or the Broadband Technology Opportunities Program for projects that will provide broadband with speeds of at least 4 Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients only.
- <2023> The attachment on line 2024 includes a statement of the total amount of capital funding expended in the previous year in meeting Connect America Phase I deployment obligations, accompanied by a list of census blocks indicating where funding was spent. This covers year three - 54.313(b)(2)(ii). Round 2 recipients only.
- <2024A> Round 2 Recipient of Incremental Support?
- <2024B> Attach list of census blocks indicating where funding was spent in year three - 54.313(b)(2)(ii). Round 2 recipients only.
- <2025A> Round 2 Recipient of Incremental Support?
- <2025B> Attach geocoded Information for Phase I milestone reports (Round 2 for year three) - Connect America Fund , WC Docket 10-90, Report and Order, FCC 13-73, paragraph 35 (May 22, 2013).
- <2015> 2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)

Name of Attached Document Listing
Required Information

Name of Attached Document Listing
Required Information

(2005) Price Cap Carrier Additional Documentation

Data Collection Form

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}

<2016> Certification support used to build broadband

Connect America Phase II Reporting {47 CFR § 54.313(e)}

<2017A> Connect America Fund Phase II recipient?

<2017C> Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2016.

<2018> Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(1)(ii)(A)

Name of Attached Document Listing
Required Information

<2019> Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(1)(ii)(C)

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Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carriers must ensure compliance with the financial reporting requirements set forth in 47 CFR 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)	Yes - Attach Certification	
(3010A)	Certification of Public Interest Obligations {47 CFR § 54.313(f)(1)(i)}	411833KS3010.pdf	
(3010B)	Please Provide Attachment	Name of Attached Document Listing Required Information	
(3012A)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(iii)}	No - No New Community Anchors	
(3012B)	Please Provide Attachment	Name of Attached Document Listing Required Information	
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	(Yes/No)	<input checked="" type="radio"/> <input type="radio"/>
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	<input type="radio"/> <input checked="" type="radio"/>
Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:			
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)	<input type="checkbox"/>	
(3016)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows	<input type="checkbox"/>	
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Document Listing Required Information	
(3018)	If the response is no on line 3014, is your company audited?	(Yes/No)	<input checked="" type="radio"/> <input type="radio"/>
If the response is yes on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:			
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers	<input checked="" type="checkbox"/>	
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows	<input checked="" type="checkbox"/>	
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit.	<input checked="" type="checkbox"/>	
If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:			
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers	<input type="checkbox"/>	
(3023)	Underlying information subjected to a review by an independent certified public accountant	<input type="checkbox"/>	
(3024)	Underlying information subjected to an officer certification.	<input type="checkbox"/>	
(3025)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows	<input type="checkbox"/>	
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information	411833KS3026.pdf

REDACTED - FOR PUBLIC INSPECTION

REDACTED

[The Financial Statement of The Southern Kansas Telephone Company, Inc. filed pursuant to 47 C.F.R. § 54.313(f)(2) is redacted in its entirety as Highly Confidential Information]

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4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

Public Interest Obligations – FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

4001. Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

Community Anchor Institutions – FCC 14-98 (paragraph 79)

4003a. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

If yes to 4003A, please provide a response for 4003B.

4003b. Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.

Name of Attached Document Listing Required Information

Broadband Deployment Locations – FCC 14-98 (paragraph 80)

4004a. Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481.

Name of Attached Document Listing Required Information

4004b. Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband speed and data usage allowances available in the relevant geographic area.

Name of Attached Document Listing Required Information

Certification - Agent / Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) <u>TCA, Inc.</u> is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent:	TCA, Inc.
Name of Reporting Carrier:	SOUTHERN KANSAS TEL
Signature of Authorized Officer:	CERTIFIED ONLINE Date: 06/22/2017
Printed name of Authorized Officer:	William McVey
Title or position of Authorized Officer:	Chief Financial Officer
Telephone number of Authorized Officer:	6205848337 ext.
Study Area Code of Reporting Carrier:	411833 Filing Due Date for this form: 07/03/2017
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier:	SOUTHERN KANSAS TEL
Name of Authorized Agent Firm:	TCA, Inc.
Signature of Authorized Agent or Employee of Agent:	CERTIFIED ONLINE Date: 06/22/2017
Name of Authorized Agent Employee:	Brian Jarvis
Title or position of Authorized Agent or Employee of Agent	Senior Financial Consultant
Telephone number of Authorized Agent or Employee of Agent:	7192664334 ext.
Study Area Code of Reporting Carrier:	411833 Filing Due Date for this form: 07/03/2017
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Attachments

REDACTED - FOR PUBLIC INSPECTION

REDACTED

[The Voice Service Outage Report of The Southern Kansas Telephone Company, Inc. filed pursuant to 47 C.F.R. § 54.313(a)(2) is redacted in its entirety as Highly Confidential Information]

FCC Form 481 Certifications

FCC Form 481 Line 510

The Southern Kansas Telephone Company, Inc.

SAC 411833

Line 510: Service Quality Standards & Consumer Protection Rules Compliance

Service Quality Standards

The company complies with the service quality standards as adopted in the Kansas Corporation Commission (KCC) Docket Nos. 191,206-U and 95-GIMT-047-GIT.

Consumer Protection Rules

The company complies with the following consumer protection rules:

- FCC rules regarding verification of orders for telecommunications service as required of submitting carriers {47 CFR §64.1100}
- The FCC's Truth-in-Billing Requirements {47 CFR §64.2400}
- Billing practice standards as set out in KCC Docket No. 06-GIMT-187-GIT and subsequent billing practice standards approved by the KCC.
- All of the requirements of 47 C.F.R. § Part 64 Subpart U, Customer Proprietary Network Information and Federal Trade Commission 16 C.F.R. §681, Identity Theft Red Flags

FCC Form 481 Certifications

FCC Form 481 Lines 510 and 610
The Southern Kansas Telephone Company, Inc.
SAC 411833

Line 610: Functionality in Emergency Situations

- The company maintains a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations. {47 CFR §54.202(a)}
- The company has made reasonable provisions to meet emergencies resulting from power failures; sudden and prolonged increases in traffic; staff shortages; and fire, storm, and acts of God.

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**(700) Price Offerings including Voice Rate Data
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

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<015> Study Area Name	SOUTHERN KANSAS TEL
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<020> Program Year	2018
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<030>	Contact Name - Person USAC should contact regarding this data	Brian Jarvis
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<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.
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<039>	Contact Email Address - Email Address of person identified in data line <030>	bjarvis@tcatel.com
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1/1/2017

<703>

[illegible]

(710) Broadband Price Offerings Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<711>	<a1>	<a2>	<b1>	<b2>	<c>	<d1>	<d2>	<d3>	<d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select}
	KS	Atlanta	67.95	0.0	67.95	12.0	1.0	999999	Other, No Limit on usage
	KS	Beaumont	67.95	0.0	67.95	12.0	1.0	999999	Other, No Limit on usage
	KS	Burden	67.95	0.0	67.95	12.0	1.0	999999	Other, No Limit on usage
	KS	Cambridge	67.95	0.0	67.95	12.0	1.0	999999	Other, No Limit on usage
	KS	Clearwater	67.95	0.0	67.95	12.0	1.0	999999	Other, No Limit on usage
	KS	Dexter	67.95	0.0	67.95	12.0	1.0	999999	Other, No Limit on usage
	KS	Elk Falls	67.95	0.0	67.95	12.0	1.0	999999	Other, No Limit on usage
	KS	Grenola	67.95	0.0	67.95	12.0	1.0	999999	Other, No Limit on usage
	KS	Latham	67.95	0.0	67.95	12.0	1.0	999999	Other, No Limit on usage
	KS	Longton	67.95	0.0	67.95	12.0	1.0	999999	Other, No Limit on usage
	KS	Piedmont	67.95	0.0	67.95	12.0	1.0	999999	Other, No Limit on usage
	KS	Reece	67.95	0.0	67.95	12.0	1.0	999999	Other, No Limit on usage
	KS	Rosalia	67.95	0.0	67.95	12.0	1.0	999999	Other, No Limit on usage
	KS	Clearwater North	67.95	0.0	67.95	12.0	1.0	999999	Other, No Limit on usage
	KS	Atlanta	67.95	0.0	67.95	12.0	2.0	999999	Other, No Limit on usage
	KS	Burden	67.95	0.0	67.95	12.0	2.0	999999	Other, No Limit on usage
	KS	Clearwater	67.95	0.0	67.95	12.0	2.0	999999	Other, No Limit on usage
	KS	Dexter	67.95	0.0	67.95	12.0	2.0	999999	Other, No Limit on usage
	KS	Grenola	67.95	0.0	67.95	12.0	2.0	999999	Other, No Limit on usage
	KS	Longton	67.95	0.0	67.95	12.0	2.0	999999	Other, No Limit on usage
	KS	Clearwater North	67.95	0.0	67.95	12.0	2.0	999999	Other, No Limit on usage

(710) Broadband Price Offerings
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	411833
<015>	Study Area Name	SOUTHERN KANSAS TEL
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Brian Jarvis
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bjarvis@tcatel.com

[illegible]

(800) Operating Companies	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	411833
<015>	Study Area Name	SOUTHERN KANSAS TEL
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Brian Jarvis
<035>	Contact Telephone Number - Number of person identified in data line <030>	7192664334 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	bjarvis@tcatel.com

<810>	Reporting Carrier	Southern Kansas Telephone Company, Inc.
<811>	Holding Company	Not Applicable
<812>	Operating Company	Southern Kansas Telephone Company, Inc.

[illegible]

FCC Form 481 Certifications

FCC Form 481 Line 1210

The Southern Kansas Telephone Company, Inc.

SAC 411833

Line 1210: Lifeline Terms and Conditions

Lifeline subscribers receive unlimited local calling at a discount of \$9.25.

3. LOCAL SERVICES

3.1 Local Exchange Telephone Service - Basic Service Rates

These monthly rates apply to all subscribers of the Company. This rate covers the provision of network access to a local customer location, and entitles the customer to local calls (without toll charge) to all local stations connected to a central office of the exchange, or to all local extended local service area where comprised of more than one exchange.

		<u>Monthly Rates</u>	
		<u>Rate Group 1</u>	<u>Rate Group 2</u>
	Business Access Line	\$20.00	\$34.95
	Residence Access Line	\$17.00	\$24.95
	Payphone Service Line	\$20.00	\$34.95
(N)	Lifeline Service Credit		
	Federal	\$9.25	\$9.25
(N)	State	\$7.77	\$7.77

When a multi-line business customer uses their own equipment to channelize local service at a DS-1 level, the Federal End User Common Line Charge will apply at a ratio of five (5) per DS-1.

3.11 Kansas Universal Service Fund

Beginning March 1, 1997, the Company will assess a fee for funding of the Kansas Universal Service Fund (KUSF), including Kansas Lifeline Service Program (KLSP), and the Kansas Telecommunications Access Program (TAP). These funds were enacted by the Kansas Legislature in 1996, and authorized by the Kansas Corporation Commission on December 27, 1996 in Docket No. 190,492-U. The Amount of the fee may vary as determined by the Fund Administrator.

3.12 Lifeline Service

(T) The Lifeline Service Program (Lifeline) is a program designated to maintain universal service by providing a reduction in the price of certain qualifying services, as determined by the Federal Communications Commission (FCC), to qualifying customers.

a. General

- | | | |
|-----|----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| (T) | 1. | Federal Credit – the amount of federal credit provided to qualifying customers will be the maximum amount authorized by the FCC and will be applied to qualifying service as determined by the FCC. |
| (T) | 2. | State Credit - the amount of state credit provided to qualifying customers will be the maximum amount authorized by the Kansas Corporation Commission (KCC) and will be applied to qualifying service as determined by the KCC. |
| (T) | 3. | In no event shall any service rate be reduced below zero as a result of applying any Lifeline credit. |
| (T) | 4. | <p>Local service for Lifeline customers may be disconnected for non-payment of toll charges.</p> <p style="margin-left: 20px;">(a) Toll Restriction Service will be provided to Lifeline customers at no charge.</p> <p style="margin-left: 20px;">(b) Lifeline customers may be required to accept Toll Restriction Service as a condition to avoid disconnection of local service for non-payment of toll.</p> <p style="margin-left: 20px;">(c) Lifeline customers are not required to pay a deposit in order to obtain local service if the customer voluntarily elects installation of Toll Restriction Service.</p> |
| (T) | 5. | Partial payments from Lifeline customers will be applied first to local service charges and then to toll charges. |
| (T) | 6. | Lifeline customers will not be denied re-establishment of service on the basis that the customer was previously disconnected for non-payment of toll charges. |
| (T) | 7. | Lifeline will not be furnished on a Foreign Exchange service arrangement. |

b. Eligibility Requirements

- | | | |
|-----|----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| (T) | 1. | Lifeline will be provided for one (1) qualifying service per household, at the customer's principal place of residence who have only one qualifying service to their residential premises or dwelling place. ¹ Verification of this requirement will be through self-certification. |
|-----|----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

(T) ¹ A residential premises or dwelling place is that location where a customer resides, even if such residential premises or dwelling place is only a single room. Lifeline will not be provided if the customer has access to other qualifying service within the residential premises or dwelling place, provided/owned by himself/herself or owned/provided by others. If, however, it can be determined by the Company that access to other existing qualifying service owned/provided by others is virtually denied, or is inaccessible to the customer, then Lifeline service will be provided.

2. Show that he/she is currently a recipient of benefits from one of the following public assistance programs:

(T)

1. Federal Public Housing Assistance (FPHA)
2. Medicaid
3. Supplemental Nutrition Assistance Program (SNAP)
4. Supplemental Security Income (SSI)
5. Veterans Pension & Survivors Pension Benefit

Tribal Lands Programs

1. Bureau of Indian Affairs General Assistance
2. Food Distribution Program on Indian Reservations
3. Head Start (only those households meeting its' income qualifying standard)
4. Tribally Administered Temporary Assistance for Needy Families

(T)

Individuals choosing this option must obtain and provide to the Company a copy of a valid identification card or the appropriate documents that are issued to them by the agency administering the program.

c. Income Eligibility

(C)

A customer shall be eligible for the Lifeline Service program if that customer's household annual income is at or below 135% of the federal poverty level. Such customers may obtain a form from the Company suitable for self-certification of income level, and provide the completed form to the Company to begin service under the program. Proof of income is required. Acceptable documentation may include the prior year's federal, state, or tribal tax return, or other forms of income certification. Customers should contact the Company for specific details.

d. Certification

1. The customer will certify eligibility for Lifeline service. Re-certification is required annually or at anytime the qualifying criteria for the customer changes.

Recipients of Lifeline service must notify the Company when they no longer qualify for Lifeline service. Upon receipt of the notification, the Company will discontinue Lifeline service.

If the Company discovers that conditions exist that disqualify the recipient of Lifeline service, local service will be billed at the full rate. The customer will be billed retroactively either to the date Lifeline service commenced or the date the recipient no longer qualified for the service, not to exceed 12 months.

KANSAS **LIFELINE** PROGRAM



*You may be eligible
to receive up
to **\$17.02 off**
your monthly
local telephone bill
through the
Lifeline Program.*

*You are eligible if you receive
any of the following:*

- Medicaid
- Section 8 Public Housing Assistance
- Supplemental Nutrition Assistance Program
- Supplemental Security Income (SSI)
- Veterans Pension and Survivors Benefit
- Bureau of Indian Affairs General Assistance
- Head Start (tribal programs for only those meeting its income qualifying standard)
- Food Distribution Program on Tribal Lands
- Tribally Administered Temporary Assistance for Needy Families

2017 LIFELINE INCOME ELIGIBILITY GUIDELINES

Number in Household:	Maximum Annual Income:
1	\$16,281
2	\$21,924
3	\$27,567
4	\$33,210
5	\$38,853
6	\$44,496
7	\$50,139
8	\$55,782

Each additional person in household: \$5,643

A consumer must provide three consecutive months of income documentation (e.g. paystubs), or provide a copy of his or her previous year tax return. For more information about Kansas Lifeline, call your local telephone company. The number is on your telephone bill and in the front section of the telephone directory.



P.O. Box 800
Clearwater, KS
67026-0800

www.SKTMainstreet.com

620.584.2255
888.758.8976

MILESTONE CERTIFICATION

June 26, 2017

Marlene H. Dortch, Secretary
Federal Communications Commission
Office of the Secretary
445 12th Street SW
Room TW-A325
Washington, D.C. 20554

Re: Form 481 Line 3010 - Milestone Certification Pursuant to 47 C.F.R. § 54.313(f)(1)(i)

Dear Ms. Dortch:

Southern Kansas Telephone Company, Study Area Code 411833, in accordance with 47 C.F.R. § 54.313(f)(1)(i) of the Commission's rules, hereby certifies that it is taking reasonable steps to provide upon reasonable request broadband service at actual speeds of at least 10 Mbps downstream/1 Mbps upstream, with latency suitable for real-time applications, including Voice over Internet Protocol, and usage capacity that is reasonably comparable to comparable offerings in urban areas and that requests for such service are met within a reasonable amount of time.

Respectfully submitted,

A handwritten signature in blue ink that reads "William R. McVey". The signature is written in a cursive style.

William R. McVey
Chief Financial Officer

REDACTED - FOR PUBLIC INSPECTION

REDACTED

[The Financial Statement of The Southern Kansas Telephone Company, Inc. filed pursuant to 47 C.F.R. § 54.313(f)(2) is redacted in its entirety as Highly Confidential Information]